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PTO/SB/05 (08-00) (modified)

Approved for use through 9/30/2001, OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE**NEW UTILITY  
PATENT APPLICATION  
TRANSMITTAL**(only for new nonprovisional applications under  
37 CFR 1.53(b))

Attorney Docket Number 20735-05217

First Named Inventor Eng-Whatt Toh

Title Secure and reliable document delivery

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**APPLICATION ELEMENTS**

1. ☒ Fee Transmittal Form (in duplicate)
2. ☒ Applicant claims small entity status.  
See 37 CFR 1.27
3. ☒ Specification Total Pages **49**  
(preferred arrangement set forth below)
  - Descriptive Title of the Invention
  - Cross Reference(s) to Related Case(s)
  - Statement Regarding Fed sponsored R & D
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawing(s)
  - Detailed Description
  - Claim or Claims
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) Total Sheets **9**
5. Oath or Declaration
  - a. ☒ New Declaration Total Pages **1**  
☐ Executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 18 completed)
    - i. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s)  
named in the prior application, see 37 CFR  
1.63(d)(2) and 1.33(b).
6. ☒ Application Data Sheet. See 37 CFR 1.76

**ACCOMPANYING APPLICATION PARTS**

7. ☒ Assignment Papers (cover sheet & document(s))
8. ☐ Certified Copy of Priority Document(s) (if foreign priority  
is claimed)
9. ☒ Power of Attorney or Authorization of Agent
10. ☐ 37 CFR 3.73(b) Statement
11. ☐ Preliminary Amendment
12. ☐ Information Disclosure Statement & PTO-1449  
☐ Copies of IDS Citation(s)
13. ☐ Nonpublication Request under 35 U.S.C. 122  
(b)(2)(B)(i). Applicant must attach form  
PTO/SB/35 or its equivalent
14. ☒ Return Postcard
15. ☐
16. ☐
17. ☐

**ADDRESS TO:**Box Patent Application  
Commissioner for Patents  
Washington, D.C. 2023118. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information below and in a preliminary amendment or in an  
Application Data Sheet under 37 CFR 1.76:☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: \_\_\_\_/\_\_\_\_

Prior application information: Examiner: \_\_\_\_\_ Group/Art Unit: \_\_\_\_\_

**For CONTINUATION OR DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under  
Box 5b, is considered a part of the disclosure of the accompanying continuing or divisional application and is hereby incorporated by reference. The  
incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.**19. CORRESPONDENCE ADDRESS**☒ Customer Number and Bar Code  
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|-------------------|-----------------|-----------------------------------|---------------|
| Name (Print/Type) | Michael W. Farn | Registration No. (Attorney/Agent) | 41,015        |
| Signature         |                 | Date                              | June 21, 2001 |

|                                    |  |   |
|------------------------------------|--|---|
| 0002/PTO(modified)<br>Rev. 10/2000 | U.S. Department of Commerce<br>Patent and Trademark Office | <b>Complete if Known</b><br>Application Number: Unassigned<br>Filing Date: June 21, 2001<br>First Named Inventor: Eng-Whatt Toh<br>Group Art Unit: Unassigned<br>Examiner Name: Unassigned<br>Attorney Docket Number: 20735-05217 |
|------------------------------------|--|---|

  

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| <b>FEE TRANSMITTAL</b><br><br><b>TOTAL AMOUNT OF PAYMENT</b><br>Subtotal (1) + Subtotal (2) + Subtotal (3) = <b>(\$818)</b> |  |
|---|--|

  

| <b>METHOD OF PAYMENT</b><br><br><b>1. The Commissioner is hereby authorized to:</b><br><br><input type="checkbox"/> Charge the indicated fees to the below mentioned deposit account.<br><br><input checked="" type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account †<br><br><input checked="" type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27<br><br>Deposit Account Number: 19-2555<br>Deposit Account Name: FENWICK & WEST LLP<br><br>A Duplicate Copy of this authorization is attached<br><br><b>2. <input checked="" type="checkbox"/> Payment Enclosed:</b><br><input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other | <b>FEE CALCULATION (continued)</b><br><br><b>3. ADDITIONAL FEES</b><br><table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity<br/>Fee Code/Fee</th> <th style="text-align: left;">Small Entity<br/>Fee Code/Fee</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: right;">Fee Due</th> </tr> </thead> <tbody> <tr><td>105/\$130</td><td>205/\$65</td><td>Surcharge - late filing fee or oath</td><td style="text-align: right;">[ ]</td></tr> <tr><td>127/\$50</td><td>227/\$25</td><td>Surcharge-late provisional filing fee or cover sheet</td><td style="text-align: right;">[ ]</td></tr> <tr><td>147/\$2,520</td><td>147/\$2,520</td><td>For filing a request for reexamination</td><td style="text-align: right;">[ ]</td></tr> <tr><td>115/\$110</td><td>215/\$55</td><td>Extension for response within first month†</td><td style="text-align: right;">[ ]</td></tr> <tr><td>116/\$390</td><td>216/\$195</td><td>Extension for response within second month†</td><td style="text-align: right;">[ ]</td></tr> <tr><td>117/\$890</td><td>217/\$445</td><td>Extension for response within third month†</td><td style="text-align: right;">[ ]</td></tr> <tr><td>118/\$1,390</td><td>218/\$695</td><td>Extension for response within fourth month†</td><td style="text-align: right;">[ ]</td></tr> <tr><td>128/\$1,890</td><td>228/\$945</td><td>Extension for response within fifth month†</td><td style="text-align: right;">[ ]</td></tr> <tr><td>119/\$310</td><td>219/\$155</td><td>Notice of Appeal</td><td style="text-align: right;">[ ]</td></tr> <tr><td>141/\$1,240</td><td>241/\$620</td><td>Petition to revive unintentionally abandoned application</td><td style="text-align: right;">[ ]</td></tr> <tr><td>142/\$1,240</td><td>242/\$620</td><td>Utility Issue Fee (Or Reissue)</td><td style="text-align: right;">[ ]</td></tr> <tr><td>143/\$440</td><td>243/\$220</td><td>Design Issue Fee</td><td style="text-align: right;">[ ]</td></tr> <tr><td>122/\$130</td><td>122/\$130</td><td>Petitions to the Commissioner</td><td style="text-align: right;">[ ]</td></tr> <tr><td>126/\$180</td><td>126/\$180</td><td>Submission of Information Disclosure Statement</td><td style="text-align: right;">[ ]</td></tr> <tr><td>179/\$710</td><td>279/\$355</td><td>Request for Continued Examination (RCE)</td><td style="text-align: right;">[ ]</td></tr> <tr><td>581/\$40</td><td>581/\$40</td><td>Recording each patent assignment per property (times number of properties)</td><td style="text-align: right;">40</td></tr> <tr><td>146/\$710</td><td>246/\$355</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td style="text-align: right;">[ ]</td></tr> <tr><td>149/\$710</td><td>249/\$355</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td style="text-align: right;">[ ]</td></tr> <tr><td colspan="3">Other fee (specify):</td><td style="text-align: right;">[ ]</td></tr> <tr><td colspan="3">Other fee (specify):</td><td style="text-align: right;">[ ]</td></tr> <tr> <td colspan="3" style="text-align: right;"><b>SUBTOTAL (3)</b></td> <td style="text-align: right;"><b>(\$40)</b></td> </tr> </tbody> </table> | Large Entity<br>Fee Code/Fee   | Small Entity<br>Fee Code/Fee | Fee Description | Fee Due | 105/\$130 | 205/\$65 | Surcharge - late filing fee or oath | [ ] | 127/\$50 | 227/\$25 | Surcharge-late provisional filing fee or cover sheet | [ ] | 147/\$2,520 | 147/\$2,520 | For filing a request for reexamination | [ ] | 115/\$110 | 215/\$55 | Extension for response within first month† | [ ] | 116/\$390 | 216/\$195 | Extension for response within second month† | [ ] | 117/\$890 | 217/\$445 | Extension for response within third month† | [ ] | 118/\$1,390 | 218/\$695 | Extension for response within fourth month† | [ ] | 128/\$1,890 | 228/\$945 | Extension for response within fifth month† | [ ] | 119/\$310 | 219/\$155 | Notice of Appeal | [ ] | 141/\$1,240 | 241/\$620 | Petition to revive unintentionally abandoned application | [ ] | 142/\$1,240 | 242/\$620 | Utility Issue Fee (Or Reissue) | [ ] | 143/\$440 | 243/\$220 | Design Issue Fee | [ ] | 122/\$130 | 122/\$130 | Petitions to the Commissioner | [ ] | 126/\$180 | 126/\$180 | Submission of Information Disclosure Statement | [ ] | 179/\$710 | 279/\$355 | Request for Continued Examination (RCE) | [ ] | 581/\$40 | 581/\$40 | Recording each patent assignment per property (times number of properties) | 40 | 146/\$710 | 246/\$355 | Filing a submission after final rejection (37 CFR 1.129(a)) | [ ] | 149/\$710 | 249/\$355 | For each additional invention to be examined (37 CFR 1.129(b)) | [ ] | Other fee (specify): |  |  | [ ] | Other fee (specify): |  |  | [ ] | <b>SUBTOTAL (3)</b> |  |  | <b>(\$40)</b> |
|--|--|--|------------------------------|-----------------|---------|-----------|----------|-------------------------------------|-----|----------|----------|--|-----|-------------|-------------|--|-----|-----------|----------|--|-----|-----------|-----------|---|-----|-----------|-----------|--|-----|-------------|-----------|---|-----|-------------|-----------|--|-----|-----------|-----------|------------------|-----|-------------|-----------|--|-----|-------------|-----------|--------------------------------|-----|-----------|-----------|------------------|-----|-----------|-----------|-------------------------------|-----|-----------|-----------|--|-----|-----------|-----------|---|-----|----------|----------|--|----|-----------|-----------|---|-----|-----------|-----------|--|-----|----------------------|--|--|-----|----------------------|--|--|-----|---------------------|--|--|---------------|
| Large Entity<br>Fee Code/Fee   | Small Entity<br>Fee Code/Fee   | Fee Description  | Fee Due                      |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| 105/\$130  | 205/\$65   | Surcharge - late filing fee or oath  | [ ]                          |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| 127/\$50   | 227/\$25   | Surcharge-late provisional filing fee or cover sheet                       | [ ]                          |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| 147/\$2,520  | 147/\$2,520  | For filing a request for reexamination                                     | [ ]                          |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| 115/\$110  | 215/\$55   | Extension for response within first month†                                 | [ ]                          |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| 116/\$390  | 216/\$195  | Extension for response within second month†                                | [ ]                          |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| 117/\$890  | 217/\$445  | Extension for response within third month†                                 | [ ]                          |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| 118/\$1,390  | 218/\$695  | Extension for response within fourth month†                                | [ ]                          |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| 128/\$1,890  | 228/\$945  | Extension for response within fifth month†                                 | [ ]                          |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| 119/\$310  | 219/\$155  | Notice of Appeal   | [ ]                          |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| 141/\$1,240  | 241/\$620  | Petition to revive unintentionally abandoned application                   | [ ]                          |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| 142/\$1,240  | 242/\$620  | Utility Issue Fee (Or Reissue)   | [ ]                          |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| 143/\$440  | 243/\$220  | Design Issue Fee   | [ ]                          |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| 122/\$130  | 122/\$130  | Petitions to the Commissioner  | [ ]                          |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| 126/\$180  | 126/\$180  | Submission of Information Disclosure Statement                             | [ ]                          |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| 179/\$710  | 279/\$355  | Request for Continued Examination (RCE)                                    | [ ]                          |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| 581/\$40   | 581/\$40   | Recording each patent assignment per property (times number of properties) | 40                           |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| 146/\$710  | 246/\$355  | Filing a submission after final rejection (37 CFR 1.129(a))                | [ ]                          |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| 149/\$710  | 249/\$355  | For each additional invention to be examined (37 CFR 1.129(b))             | [ ]                          |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| Other fee (specify):   |  |  | [ ]                          |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| Other fee (specify):   |  |  | [ ]                          |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |
| <b>SUBTOTAL (3)</b>  |  |  | <b>(\$40)</b>                |                 |         |           |          |                                     |     |          |          |  |     |             |             |  |     |           |          |  |     |           |           |   |     |           |           |  |     |             |           |   |     |             |           |  |     |           |           |                  |     |             |           |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |           |           |  |     |           |           |   |     |          |          |  |    |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |  |               |

  

| <b>1. FILING FEE</b><br><table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity<br/>Fee Code/Fee</th> <th style="text-align: left;">Small Entity<br/>Fee Code/Fee</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: right;">Fee Due</th> </tr> </thead> <tbody> <tr><td>101/\$710</td><td>201/\$355</td><td>Utility Filing</td><td style="text-align: right;">355</td></tr> <tr><td>106/\$320</td><td>206/\$160</td><td>Design Filing</td><td style="text-align: right;">[ ]</td></tr> <tr><td>108/\$710</td><td>208/\$355</td><td>Reissue</td><td style="text-align: right;">[ ]</td></tr> <tr><td>114/\$150</td><td>214/\$75</td><td>Provisional Filing</td><td style="text-align: right;">[ ]</td></tr> <tr> <td colspan="3" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td style="text-align: right;"><b>(\$355)</b></td> </tr> </tbody> </table><br><b>2. CLAIMS</b><br><table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity<br/>Fee Code/Fee</th> <th style="text-align: left;">Small Entity<br/>Fee Code/Fee</th> <th style="text-align: left;">Fee Description</th> </tr> </thead> <tbody> <tr><td>103/\$18</td><td>203/\$9</td><td>Claims in excess of 20</td></tr> <tr><td>102/\$80</td><td>202/\$40</td><td>Independent claims in excess of 3</td></tr> <tr><td>104/\$270</td><td>204/\$135</td><td>Multiple dependent claim</td></tr> <tr><td>109/\$80</td><td>209/\$40</td><td>Reissue independent claims over original patent</td></tr> <tr><td>110/\$18</td><td>210/\$9</td><td>Reissue claims in excess of 20 and over original patent</td></tr> </tbody> </table> | Large Entity<br>Fee Code/Fee      | Small Entity<br>Fee Code/Fee                            | Fee Description                             | Fee Due | 101/\$710           | 201/\$355 | Utility Filing | 355 | 106/\$320 | 206/\$160 | Design Filing | [ ] | 108/\$710 | 208/\$355 | Reissue | [ ] | 114/\$150 | 214/\$75 | Provisional Filing | [ ] | <b>SUBTOTAL (1)</b> |  |  | <b>(\$355)</b> | Large Entity<br>Fee Code/Fee | Small Entity<br>Fee Code/Fee | Fee Description | 103/\$18 | 203/\$9 | Claims in excess of 20 | 102/\$80 | 202/\$40 | Independent claims in excess of 3 | 104/\$270 | 204/\$135 | Multiple dependent claim | 109/\$80 | 209/\$40 | Reissue independent claims over original patent | 110/\$18 | 210/\$9 | Reissue claims in excess of 20 and over original patent | <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">For</th> <th style="text-align: center;">(Col. 1)<br/>No of Existing Claims</th> <th style="text-align: center;">minus*</th> <th style="text-align: center;">(Col. 2)<br/>Highest No. Previously Paid For</th> <th style="text-align: center;">=</th> <th style="text-align: center;">(Col. 3)<br/>Extra**</th> <th style="text-align: center;">x</th> <th style="text-align: center;">Fee</th> <th style="text-align: center;">=</th> <th style="text-align: center;">Fee Due</th> </tr> </thead> <tbody> <tr> <td>TOTAL</td> <td style="text-align: center;">67</td> <td></td> <td style="text-align: center;">20 or 0</td> <td style="text-align: center;">=</td> <td style="text-align: center;">47</td> <td style="text-align: center;">x</td> <td style="text-align: center;">9</td> <td style="text-align: center;">=</td> <td style="text-align: center;">423</td> </tr> <tr> <td>INDEP</td> <td style="text-align: center;">3</td> <td></td> <td style="text-align: center;">3 or 0</td> <td style="text-align: center;">=</td> <td style="text-align: center;">0</td> <td style="text-align: center;">x</td> <td style="text-align: center;">40</td> <td style="text-align: center;">=</td> <td style="text-align: center;">0</td> </tr> <tr> <td colspan="10">[ ] First presentation of multiple dependent claim</td> </tr> </tbody> </table><br><div style="text-align: right;"> <b>SUBTOTAL (2)</b>    <b>(\$423)</b> </div> | For | (Col. 1)<br>No of Existing Claims | minus* | (Col. 2)<br>Highest No. Previously Paid For | = | (Col. 3)<br>Extra** | x | Fee | = | Fee Due | TOTAL | 67 |  | 20 or 0 | = | 47 | x | 9 | = | 423 | INDEP | 3 |  | 3 or 0 | = | 0 | x | 40 | = | 0 | [ ] First presentation of multiple dependent claim |  |  |  |  |  |  |  |  |  |
|---|-----------------------------------|---|---|---------|---------------------|-----------|----------------|-----|-----------|-----------|---------------|-----|-----------|-----------|---------|-----|-----------|----------|--------------------|-----|---------------------|--|--|----------------|------------------------------|------------------------------|-----------------|----------|---------|------------------------|----------|----------|-----------------------------------|-----------|-----------|--------------------------|----------|----------|---|----------|---------|---|---|-----|-----------------------------------|--------|---|---|---------------------|---|-----|---|---------|-------|----|--|---------|---|----|---|---|---|-----|-------|---|--|--------|---|---|---|----|---|---|--|--|--|--|--|--|--|--|--|--|
| Large Entity<br>Fee Code/Fee  | Small Entity<br>Fee Code/Fee      | Fee Description   | Fee Due                                     |         |                     |           |                |     |           |           |               |     |           |           |         |     |           |          |                    |     |                     |  |  |                |                              |                              |                 |          |         |                        |          |          |                                   |           |           |                          |          |          |   |          |         |   |   |     |                                   |        |   |   |                     |   |     |   |         |       |    |  |         |   |    |   |   |   |     |       |   |  |        |   |   |   |    |   |   |  |  |  |  |  |  |  |  |  |  |
| 101/\$710   | 201/\$355                         | Utility Filing  | 355   |         |                     |           |                |     |           |           |               |     |           |           |         |     |           |          |                    |     |                     |  |  |                |                              |                              |                 |          |         |                        |          |          |                                   |           |           |                          |          |          |   |          |         |   |   |     |                                   |        |   |   |                     |   |     |   |         |       |    |  |         |   |    |   |   |   |     |       |   |  |        |   |   |   |    |   |   |  |  |  |  |  |  |  |  |  |  |
| 106/\$320   | 206/\$160                         | Design Filing   | [ ]   |         |                     |           |                |     |           |           |               |     |           |           |         |     |           |          |                    |     |                     |  |  |                |                              |                              |                 |          |         |                        |          |          |                                   |           |           |                          |          |          |   |          |         |   |   |     |                                   |        |   |   |                     |   |     |   |         |       |    |  |         |   |    |   |   |   |     |       |   |  |        |   |   |   |    |   |   |  |  |  |  |  |  |  |  |  |  |
| 108/\$710   | 208/\$355                         | Reissue   | [ ]   |         |                     |           |                |     |           |           |               |     |           |           |         |     |           |          |                    |     |                     |  |  |                |                              |                              |                 |          |         |                        |          |          |                                   |           |           |                          |          |          |   |          |         |   |   |     |                                   |        |   |   |                     |   |     |   |         |       |    |  |         |   |    |   |   |   |     |       |   |  |        |   |   |   |    |   |   |  |  |  |  |  |  |  |  |  |  |
| 114/\$150   | 214/\$75                          | Provisional Filing                                      | [ ]   |         |                     |           |                |     |           |           |               |     |           |           |         |     |           |          |                    |     |                     |  |  |                |                              |                              |                 |          |         |                        |          |          |                                   |           |           |                          |          |          |   |          |         |   |   |     |                                   |        |   |   |                     |   |     |   |         |       |    |  |         |   |    |   |   |   |     |       |   |  |        |   |   |   |    |   |   |  |  |  |  |  |  |  |  |  |  |
| <b>SUBTOTAL (1)</b>   |                                   |   | <b>(\$355)</b>                              |         |                     |           |                |     |           |           |               |     |           |           |         |     |           |          |                    |     |                     |  |  |                |                              |                              |                 |          |         |                        |          |          |                                   |           |           |                          |          |          |   |          |         |   |   |     |                                   |        |   |   |                     |   |     |   |         |       |    |  |         |   |    |   |   |   |     |       |   |  |        |   |   |   |    |   |   |  |  |  |  |  |  |  |  |  |  |
| Large Entity<br>Fee Code/Fee  | Small Entity<br>Fee Code/Fee      | Fee Description   |   |         |                     |           |                |     |           |           |               |     |           |           |         |     |           |          |                    |     |                     |  |  |                |                              |                              |                 |          |         |                        |          |          |                                   |           |           |                          |          |          |   |          |         |   |   |     |                                   |        |   |   |                     |   |     |   |         |       |    |  |         |   |    |   |   |   |     |       |   |  |        |   |   |   |    |   |   |  |  |  |  |  |  |  |  |  |  |
| 103/\$18  | 203/\$9                           | Claims in excess of 20                                  |   |         |                     |           |                |     |           |           |               |     |           |           |         |     |           |          |                    |     |                     |  |  |                |                              |                              |                 |          |         |                        |          |          |                                   |           |           |                          |          |          |   |          |         |   |   |     |                                   |        |   |   |                     |   |     |   |         |       |    |  |         |   |    |   |   |   |     |       |   |  |        |   |   |   |    |   |   |  |  |  |  |  |  |  |  |  |  |
| 102/\$80  | 202/\$40                          | Independent claims in excess of 3                       |   |         |                     |           |                |     |           |           |               |     |           |           |         |     |           |          |                    |     |                     |  |  |                |                              |                              |                 |          |         |                        |          |          |                                   |           |           |                          |          |          |   |          |         |   |   |     |                                   |        |   |   |                     |   |     |   |         |       |    |  |         |   |    |   |   |   |     |       |   |  |        |   |   |   |    |   |   |  |  |  |  |  |  |  |  |  |  |
| 104/\$270   | 204/\$135                         | Multiple dependent claim                                |   |         |                     |           |                |     |           |           |               |     |           |           |         |     |           |          |                    |     |                     |  |  |                |                              |                              |                 |          |         |                        |          |          |                                   |           |           |                          |          |          |   |          |         |   |   |     |                                   |        |   |   |                     |   |     |   |         |       |    |  |         |   |    |   |   |   |     |       |   |  |        |   |   |   |    |   |   |  |  |  |  |  |  |  |  |  |  |
| 109/\$80  | 209/\$40                          | Reissue independent claims over original patent         |   |         |                     |           |                |     |           |           |               |     |           |           |         |     |           |          |                    |     |                     |  |  |                |                              |                              |                 |          |         |                        |          |          |                                   |           |           |                          |          |          |   |          |         |   |   |     |                                   |        |   |   |                     |   |     |   |         |       |    |  |         |   |    |   |   |   |     |       |   |  |        |   |   |   |    |   |   |  |  |  |  |  |  |  |  |  |  |
| 110/\$18  | 210/\$9                           | Reissue claims in excess of 20 and over original patent |   |         |                     |           |                |     |           |           |               |     |           |           |         |     |           |          |                    |     |                     |  |  |                |                              |                              |                 |          |         |                        |          |          |                                   |           |           |                          |          |          |   |          |         |   |   |     |                                   |        |   |   |                     |   |     |   |         |       |    |  |         |   |    |   |   |   |     |       |   |  |        |   |   |   |    |   |   |  |  |  |  |  |  |  |  |  |  |
| For   | (Col. 1)<br>No of Existing Claims | minus*  | (Col. 2)<br>Highest No. Previously Paid For | =       | (Col. 3)<br>Extra** | x         | Fee            | =   | Fee Due   |           |               |     |           |           |         |     |           |          |                    |     |                     |  |  |                |                              |                              |                 |          |         |                        |          |          |                                   |           |           |                          |          |          |   |          |         |   |   |     |                                   |        |   |   |                     |   |     |   |         |       |    |  |         |   |    |   |   |   |     |       |   |  |        |   |   |   |    |   |   |  |  |  |  |  |  |  |  |  |  |
| TOTAL   | 67                                |   | 20 or 0                                     | =       | 47                  | x         | 9              | =   | 423       |           |               |     |           |           |         |     |           |          |                    |     |                     |  |  |                |                              |                              |                 |          |         |                        |          |          |                                   |           |           |                          |          |          |   |          |         |   |   |     |                                   |        |   |   |                     |   |     |   |         |       |    |  |         |   |    |   |   |   |     |       |   |  |        |   |   |   |    |   |   |  |  |  |  |  |  |  |  |  |  |
| INDEP   | 3                                 |   | 3 or 0                                      | =       | 0                   | x         | 40             | =   | 0         |           |               |     |           |           |         |     |           |          |                    |     |                     |  |  |                |                              |                              |                 |          |         |                        |          |          |                                   |           |           |                          |          |          |   |          |         |   |   |     |                                   |        |   |   |                     |   |     |   |         |       |    |  |         |   |    |   |   |   |     |       |   |  |        |   |   |   |    |   |   |  |  |  |  |  |  |  |  |  |  |
| [ ] First presentation of multiple dependent claim  |                                   |   |   |         |                     |           |                |     |           |           |               |     |           |           |         |     |           |          |                    |     |                     |  |  |                |                              |                              |                 |          |         |                        |          |          |                                   |           |           |                          |          |          |   |          |         |   |   |     |                                   |        |   |   |                     |   |     |   |         |       |    |  |         |   |    |   |   |   |     |       |   |  |        |   |   |   |    |   |   |  |  |  |  |  |  |  |  |  |  |

  

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| <b>SUBMITTED BY</b><br>Typed or Printed Name: <b>Michael W. Farn</b><br><br>Signature: |  | <b>Complete (if applicable)</b><br>Reg. Number: <b>41,015</b><br><br>Date: <b>June 21, 2001</b> |
|--|--|---|

† Request for Extension of Time per 37 CFR 1.136 (a)(3) made hereby